Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Desc Main

Fill in this information to identify your case:
Debtor 1 Susan Parker-Graham
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF MISSISSIPPI
Case number 18-12789
(if known)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	211,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,492.50
	1c. Copy line 63, Total of all property on Schedule A/B	\$	217,492.50
Pa	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	199,005.84
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	12,683.39
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	64,410.21
	Your total liabilities	\$	276,099.44
Pa	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,712.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,878.57
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you Yes	ır other sc	hedules.
7 .	What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Susan Parker-Graham

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,012.50 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	12,683.39
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	12,683.39

	Case	18-12789-J	DW Doc 6		led 08/03/18 cument F	Entered 08/0	03/18 16:	05:44	Des	sc Main
Filli	in this infor	mation to identify	your case and th			ade 5 or 50				
	tor 1	Susan Parke								
		First Name	Middle	Name	La	st Name				
	tor 2 use, if filing)	First Name	Middle	Name	La	st Name				
Linit	ad States Ra	inkruptcy Court for	the: NORTHER	דפוח וא	TRICT OF MISSIS	SIPPI				
Orni	ca Glaics De	inkruptcy Court for	uic. Noithier	IV DIOT	TRIOT OF WILCOID	011 1 1				
Cas	e number _	18-12789								Check if this is an amended filing
SC n ead hink nforr	ch category, s it fits best. E mation. If more er every ques	se as complete and a e space is needed, a stion.	coperty escribe items. List a accurate as possible attach a separate sh	e. If two neet to t	o married people are this form. On the to	sset fits in more than on e filing together, both ar p of any additional page r Have an Interest In	e equally resp	onsible for su	ipply	ing correct
_	No. Go to Pa	t 2. s the property?								
1.1				Wha	t is the property? C	heck all that apply				
	122 Pinet Street address,	ree Drive if available, or other des	cription		Condominium or o	it building	the amount	of any secure	d clai	or exemptions. Put ims on <i>Schedule D:</i> ecured by <i>Property</i> .
	Moorevill	e MS	38857-0000		- 	nobile home	Current va	erty?		rrent value of the ortion you own?
	City	State	ZIP Code			rty	\$21	1,000.00		\$211,000.00
					Other	the property? Check one	Describe the nature of your ownership (such as fee simple, tenancy by the er a life estate), if known.			
				Wild		ine property: Check one	Fee sim	-		
	Lee				Debtor 2 only					
	County				•	tor 2 only debtors and another		t if this is com	nmun	ity property
				Othe	711 10001 0110 01 1110	vish to add about this ite	,			
				3 bı	r 2 bath brick h	ome on 3 acres				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$211,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Desc Main Document Page 4 of 50 Case number (if known) 18-12789 Debtor 1 Susan Parker-Graham 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes **BMW** Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: 325i Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2003 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 161,666 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Location: 122 Pinetree Drive, \$3,735.00 \$3,735.00 Mooreville MS 38857 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **BMW** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: 528i Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2000 Year: Debtor 2 only Current value of the Current value of the 201803 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Location: 122 Pinetree Drive. \$2,430.00 \$2,430,00 Mooreville MS 38857 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$6,165.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... stove, refrigerator, washer, dryer, microwave, cooking utensils, silverware, cookware, living room furniture, table, chairs, bedroom \$125.00 furniture, desk

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

television, printer, computer, dvd player

\$77.50

Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Desc Main Page 5 of 50 Document Case number (if known) 18-12789 Debtor 1 Susan Parker-Graham 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe..... personal clothing \$75.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... wedding rings \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$327.50 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

Official Form 106A/B Schedule A/B: Property page 3

Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Document Page 6 of 50 Case number (if known) 18-12789 Debtor 1 Susan Parker-Graham 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ☐ No Yes. Give specific information about them..... Name of entity: % of ownership: Independent Imaging Services, LLC 100 \$0.00 debt is greater than the value % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

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 Susan Parker-Graham
 Document
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 Case number (if known)
 18-12789

	 8. Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years 						
	Tes. Give specific information about them, including whether you already flied the returns and the tax years						
	 Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information 						
30.	 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else No 	, Social Security					
	☐ Yes. Give specific information						
31.	 Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No 						
		Surrender or refund value:					
	 Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prosomeone has died. No Yes. Give specific information 	perty because					
33.	 Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No □ Yes. Describe each claim 						
34.	4. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set of ■ No □ Yes. Describe each claim	f claims					
٥-							
35.	5. Any financial assets you did not already list ■ No □ Yes. Give specific information						
36	36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$0.00					
Pa	Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.						
١	7. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38.						
Pa	Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.						
46.	6. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. □ Yes. Go to line 47.						
Pa	Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above						

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1

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Case number (if known) 18-12789 Document Debtor 1 Susan Parker-Graham

	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$211,000.00
56.	Part 2: Total vehicles, line 5	\$6,165.00		
57.	Part 3: Total personal and household items, line 15	\$327.50		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,492.50	Copy personal property to	stal \$6,492.50
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$217,492.50

Official Form 106A/B Schedule A/B: Property page 6 Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Desc Main Document Page 9 of 50

Fill in this infor	mation to identify your	case:		
Debtor 1	Susan Parker-Gra	aham		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case number	18-12789			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec		
122 Pinetree Drive Mooreville, MS 38857 Lee County	\$211,000.00		\$21,505.00	Miss. Code Ann. § 85-3-23
3 br 2 bath brick home on 3 acres Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
stove, refrigerator, washer, dryer, microwave, cooking utensils,	\$125.00		\$125.00	Miss. Code Ann. § 85-3-1(a)
silverware, cookware, living room furniture, table, chairs, bedroom furniture, desk Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
television, printer, computer, dvd player	\$77.50		\$77.50	Miss. Code Ann. § 85-3-1(a)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
personal clothing Line from Schedule A/B: 11.1	\$75.00		\$75.00	Miss. Code Ann. § 85-3-1(a)
Ellio Hoth Goriedale 772.			100% of fair market value, up to any applicable statutory limit	
wedding rings Line from Schedule A/B: 12.1	\$50.00		\$50.00	Miss. Code Ann. § 85-3-1(a)
Line nom <i>Schedule A/D.</i> 12.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known) 18-12789

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

■ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Official Form 106C

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Fill in this information	n to identify you	r case:	MC 11 01 50			
Debtor 1 S	usan Parker-G	raham				
	rst Name	Middle Name Las	st Name			
Debtor 2 (Spouse if, filing) Fit	rst Name	Middle Name Las	st Name			
United States Bankrup	otcy Court for the:	NORTHERN DISTRICT OF MISSIS	SIPPI			
Case number 18-12	2789				_	if this is an ed filing
Official Form 10	16D					•
		Who Have Claims Se	cured by Prop	ertv		12/15
Be as complete and acc	urate as possible. If	two married people are filing together, but, number the entries, and attach it to th	oth are equally responsible	for supply		
1. Do any creditors have	claims secured by	your property?				
☐ No. Check this	box and submit th	is form to the court with your other sch	edules. You have nothing	else to rep	ort on this form.	
Yes. Fill in all o		•	3			
		GIOW.				
•	cured Claims		. Column A	Co	lumn B	Column C
for each claim. If more th	nan one creditor has	nore than one secured claim, list the creditor a particular claim, list the other creditors in F al order according to the creditor's name.		the tha	lue of collateral at supports this im	Unsecured portion
2.1 Car Credit Creditor's Name		Describe the property that secures the c	laim: \$6,832	2.20	\$3,735.00	\$3,097.20
2015 S Gloste Tupelo, MS 38 Number, Street, City, Who owes the debt? (Debtor 1 only Debtor 2 only	State & Zip Code	Location: 122 Pinetree Drive, Mooreville MS 38857 As of the date you file, the claim is: Check apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as morte car loan)				
☐ Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechani	c's lien)			
At least one of the del		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
community debt						
Date debt was incurred	11/2016	Last 4 digits of account number				
2.2 Car Credit		Describe the property that secures the c	laim: \$2,678	3.64	\$2,430.00	\$248.64
Creditor's Name		2000 BMW 528i 201803 miles				
		Location: 122 Pinetree Drive,				
		Mooreville MS 38857 As of the date you file, the claim is: Check	call that			
2015 S Gloste		apply.	t all triat			
Tupelo, MS 38	3801	Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortg	age or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechani	c's lien)			
☐ At least one of the de	•	☐ Judgment lien from a lawsuit				
Check if this claim recommunity debt		Other (including a right to offset)				
Date debt was incurred	<i>4/</i> 2016	Last 4 digits of account number				

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Debtor 1 Susan	Parker-Graham		Ca	ase number (if know)	18-12789	
First Name	Middle N	Name Last Name	_			
2.3 Renasant B	Bank	Describe the property that secures	the claim:	\$12,806.00	\$211,000.00	\$0.00
Creditor's Name		122 Pinetree Drive Moorevil	le, MS			
		38857 Lee County				
	ruptcy Dept.	3 br 2 bath brick home on 3 As of the date you file, the claim is:				
Po Box 414	-	apply.	Criscii dii tilat			
Tupelo, MS		Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	t? Check one	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	er onder ener	☐ An agreement you made (such as	mortgage or secur	ed		
Debtor 2 only		car loan)	o.tgago o. coca.	04		
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit				
☐ Check if this clair		Other (including a right to offset)	Second Mort	gage		
	Opened 12/11 Last Active					
Date debt was incur	red 11/15/17	Last 4 digits of account num	ber 0001			
2.4 Seterus, Inc	с.	Describe the property that secures	the claim:	\$176,689.00	\$211,000.00	\$0.00
Creditor's Name		122 Pinetree Drive Moorevil	le, MS			
		38857 Lee County 3 br 2 bath brick home on 3	acres			
Attn: Bankr Po Box 107		As of the date you file, the claim is:				
Hartford, C		apply.				
	City, State & Zip Code	☐ Contingent☐ Unliquidated				
Number, Street, C	only, State & Zip Code	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or secur	ed		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this clair community debt		■ Other (including a right to offset)	Mortgage			
Date debt was incur	Opened 08/10 Last Active red 2/02/18	Last 4 digits of account num	_{ber} 5557			
Add the dollar value	ue of your entries in C	Column A on this page. Write that num	iber here:	\$199,005.	84	
If this is the last pa Write that number		I the dollar value totals from all pages.		\$199,005.	84	
Part 2: List Othe	ers to Be Notified fo	or a Debt That You Already Listed	I			
trying to collect from	n you for a debt you o	oe notified about your bankruptcy for a owe to someone else, list the creditor at you listed in Part 1, list the additiona his page.	in Part 1, and thei	n list the collection age	ncy here. Similarly, if you l	nave more
Name Number	er, Street, City, State &	Zip Code	ما سادادا	ling in Part 1 did you are	or the creditor? 2.4	
Shapiro &	Massey LLC	·		line in Part 1 did you ente	n the creditor? Z.4 _	
1080 River Flowood, I	· Oaks Drive, Sui MS 39232	te B-202	Last 4 digi	its of account number		

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		Document	Page 13 of 5	50		
Fill i	n this information to identify your case:					
Debt	or 1 Susan Parker-Graham					
	First Name	Middle Name	Last Name			
Debt (Spous	or 2 se if, filing) First Name	Middle Name	Last Name			
Unite	ed States Bankruptcy Court for the: NO	RTHERN DISTRICT OF	MISSISSIPPI			
Case	e number 18-12789					
(if know	10 12100				_	if this is an ed filing
					amenu	eu illing
Offic	cial Form 106E/F					
Sch	edule E/F: Creditors Who	Have Unsecure	d Claims			12/15
Sched eft. At name	lule G: Executory Contracts and Unexpired L lule D: Creditors Who Have Claims Secured b ttach the Continuation Page to this page. If y and case number (if known).	by Property. If more space ou have no information to	is needed, copy the Part	you need, fill it out, r	number the entries in	the boxes on the
Part						
_	Oo any creditors have priority unsecured clair	ns against you?				
_	☑ No. Go to Part 2. ■					
	Yes.					
ic p	.ist all of your priority unsecured claims. If a dentify what type of claim it is. If a claim has both lossible, list the claims in alphabetical order according to the claims one creditor holds a particula.	priority and nonpriority amount of the creditor's name.	ounts, list that claim here a . If you have more than tw	nd show both priority a	nd nonpriority amount	s. As much as
(1	For an explanation of each type of claim, see the	e instructions for this form in	the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service	Last 4 digits of acc	ount number	\$8,558.00	\$8,558.00	\$0.00
	Priority Creditor's Name	When we the debt				
	Attn: Special Processing Staff 100 West Capitol Street	When was the debt	incurred?			
	Room 504					
	Jackson, MS 39269					
	Number Street City State Zlp Code	As of the date you f	file, the claim is: Check a	II that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY (unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic suppor	t obligations			
	☐ Check if this claim is for a community de	ebt Taxes and certain	n other debts you owe the	government		
	Is the claim subject to offset?	_	or personal injury while yo	•		

■ No

☐ Yes

☐ Other. Specify

2016 Federal Taxes

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1 Sucan Barker Graham (If know) 18-12789

De	Susan Parker-Granam		Case nui	mber (if know)	18-12/89	
2.2	Mississippi Department of Revenue	Last 4 digits of account number		\$2,253.39	\$1,638.00	\$615.39
	Priority Creditor's Name Bankruptcy Section PO Box 22808	When was the debt incurred?	2015			
	Jackson, MS 39225-2808					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all th	hat apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the go	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal in	jury while you w	vere intoxicated		
	■ No	Other. Specify				
	☐ Yes	2015 taxes	3			
	Mississippi Department of			£4 972 00	¢4 972 00	£0.00
2.3	Revenue Priority Creditor's Name	Last 4 digits of account number	·	\$1,872.00	\$1,872.00	\$0.00
	Bankruptcy Section	When was the debt incurred?				
	PO Box 22808					
	Jackson, MS 39225-2808 Number Street City State Zlp Code	As of the data you file the claim	io. Chaola all th	hat annly		
	Who incurred the debt? Check one.	As of the date you file, the claim	i is. Check all tr	пат арріу		
	Debtor 1 only	☐ Contingent				
	_	☐ Unliquidated				
	Debtor 2 only	Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	\square Check if this claim is for a community debt	Taxes and certain other debts	you owe the go	vernment		
	Is the claim subject to offset?	Claims for death or personal in	jury while you w	vere intoxicated		
	No	Other. Specify				
	☐ Yes	2016 State	Taxes			
Pa	rt 2: List All of Your NONPRIORITY Unsecu	ured Claims				
3.	Do any creditors have nonpriority unsecured claim					
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
	_	and the tro sourt man your outlor				
	Yes.					
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other	laim. For each claim listed, identify w	hat type of clain	m it is. Do not list cla	ims already included in Pa	art 1. If more

Total claim

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Page 15 of 50 Document Case number (if know) Debtor 1 Susan Parker-Graham 18-12789 \$93.28 4.1 Acariahealth Pharmacy #11 Inc Last 4 digits of account number Nonpriority Creditor's Name PO Box 956780 When was the debt incurred? Saint Louis, MO 63195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes 4.2 Afni Last 4 digits of account number 6764 \$1,255.80 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 04/18** Po Box 3097 **Bloomington, IL 61702** As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney At T ☐ Yes 4.3 \$101.00 Americollect Last 4 digits of account number Nonpriority Creditor's Name Po Box 1566 When was the debt incurred? 1851 South Alverno Road Manitowoc, WI 54221 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

■ Other. Specify Collection Attorney Premier Radiology Pa

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Debtor 1 Susan Parker-Graham

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4.4	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	4757	\$13,873.00			
	Attn: Bankruptcy		Opened 12/10 Last Active				
	Po Box 982238	When was the debt incurred?	7/20/15				
	El Paso, TX 79998						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	<u> </u>	Debts to pension or profit-sharin					
	■ No	·					
	Yes	Other. Specify Credit Card	<u> </u>				
4.5	Chase Card Services	Last 4 digits of account number	8795	\$3,065.00			
	Nonpriority Creditor's Name	_		<u> </u>			
	Correspondence Dept		Opened 02/13 Last Active				
	Po Box 15298	When was the debt incurred?	6/16/15				
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	no or me date you me, me claim.	C. Chook all that apply				
	■ Debtor 1 only	Continuent	☐ Contingent ☐ Unliquidated				
	☐ Debtor 2 only	`					
	☐ Debtor 1 and Debtor 2 only	Disputed	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	<u></u>					
	Check if this claim is for a community	Student loans	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	debt Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharin					
	☐ Yes	■ Other. Specify Credit Card					
4.6	Citibank, NA	Last 4 digits of account number		\$6,562.00			
	Nonpriority Creditor's Name PO Box 6500	When was the debt incurred?					
	Sioux Falls, SD 57117	mion was the dest mounted.					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	·				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharin					
	□ Yes	Other. Specify credit card					
	. ==	- Other. Specify					

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Commenity Bank/Maurices	Last 4 digits of account number	\$100.00
Nonpriority Creditor's Name POB 659705	When was the debt incurred?	
San Antonio, TX 78265	Their was the dest incurred.	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify credit card	
Comprehensive Pain Specialists	Last 4 digits of account number	\$232.40
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 440210 Nashville, TN 37244	when was the dept incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Dermatology Center of North MS PA	Last 4 digits of account number	\$227.52
Nonpriority Creditor's Name	When was the debt incurred?	
516 Pegram Drive Tupelo, MS 38801	when was the dept incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•••	
■ Debtor 1 only	☐ Contingent	
Deptor 1 only	- Contingent	

Debtor 2 only Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Is the claim subject to offset? ■ No

☐ Yes

☐ Unliquidated ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify medical

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Case 18-12789-JDW Document Page 18 of 50 Debtor 1 Susan Parker-Graham Case number (if know) 18-12789 4.1 \$498.00 **DexYP** Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 619009 When was the debt incurred? San Antonio, TX 78261 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify business debt ☐ Yes 4.1 **Direct Tv** \$172.63 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6414 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify services ☐ Yes 4.1 \$882.24 **ERC** Last 4 digits of account number Nonpriority Creditor's Name PO Box 23870 When was the debt incurred? Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection for unknown ☐ Yes

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Debtor 1	Susan Parker-Graham	Document	Page 19 of 50 Case number (if know)	18-12789
DODIOI I	ousan i aikei-oranam			10-12/03

4.1 3	Frost-Arnett	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name P.O. Box 198988	When was the debt incurred?	
	Nashville, TN 37219-8988 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Labs/Associated Pathologists	
4.1 4	Knight Nonpriority Creditor's Name	Last 4 digits of account number	\$9,000.00
	9 East Loockerman St Ste 3A-543 Dover, DE 19901	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify business debt	
4.1 5	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name	Last 4 digits of account number	\$631.00
	Po Box 10497	When was the debt incurred? Opened 12/17	
	Greenville, SC 29603		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Factoring Company Account Credit One Bank N.A.	

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4.1 Michael E Steuer MD PC	Last 4 digits of account number	\$25.00
Nonpriority Creditor's Name PO Box 1798	When was the debt incurred?	
Memphis, TN 38101 Number Street City State Zlp Code	As of the date year file the elements (Charles II that are he	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only		
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical	
4.1 North MS Medical Clinics	Last 4 digits of account number	\$200.00
Nonpriority Creditor's Name		V _00.00
Attn #13416K	When was the debt incurred?	
PO Box 14000 Belfast, ME 04915-4033		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
4.1 Portfolio Recovery	Last 4 digits of account number 4005	\$8,280.00
Nonpriority Creditor's Name	Last 4 digits of account number	40,200.00
120 Corporate Blvd Ste 1	When was the debt incurred? Opened 07/17	
Norfolk, VA 23502 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or the date you me, the chain io. Orlook all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Factoring Company Account Capital One Bank Usa N.A.	

Debtor 1 Susan Parker-Graham

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Case number (if know) Debtor 1 Susan Parker-Graham 18-12789 Rheumatology & Osteoporosis Ctr 4.1 \$10.57 9 Last 4 digits of account number Nonpriority Creditor's Name 540 Trinity Creek ove When was the debt incurred? Cordova, TN 38018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical ☐ Yes 4.2 Synchrony Bank/Care Credit 7757 \$3,904.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 01/15 Last Active Po Box 965061 When was the debt incurred? 7/12/15 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.2 \$181.50 The Imaging Center at Wolf River Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 630945 Cincinnati, OH 45263 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical

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Susan Farker-Granam		To-12/09	
Toyota Financial Services	Last 4 digits of account number	0001	\$11,471.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8026 Cedar Rapids, IA 52409	When was the debt incurred?	Opened 04/14 Last Active 1/18/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify reposessio	n 11/2016	
Tupelo Service Finance Nonpriority Creditor's Name	Last 4 digits of account number		\$244.27
PO Box 1791 Tupelo, MS 38802	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify collection f	or North MS Med Center	
Wages Roofing	Last 4 digits of account number		\$3,000.00
Nonpriority Creditor's Name 63 Carnathan Drive	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·
Tupelo, MS 38801 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify services		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Susan Parker-Graham		Case number (if know)	18-12789
Name and Address AFNI PO Box 3097 Bloomington, IL 61702	On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Alltran Financial PO Box 610 Sauk Rapids, MN 56379	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Alltran Financial LP PO Box 722929 Houston, TX 77272	On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Associated Pathologists LLC c/o Pathgroup PO Box 740858 Cincinnati, OH 45274	On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address AT&T Mobility PO Box 536216 Atlanta, GA 30353	On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priorit Part 2: Creditors with Nonpr	
Name and Address Couch, Conville, & Blitt 1450 Poydras St. Ste 2200 New Orleans, LA 70112	On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address ERC PO Box 57610 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address Firstsource 205 Bryant Woods South Buffalo, NY 14228	On which entry in Part 1 or Part 2 did y Line 4.18 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address IC System PO Box 64437 Saint Paul, MN 55164	On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpr	
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	

Page 24 of 50 Document Case number (if know) Debtor 1 Susan Parker-Graham 18-12789 Mendelson Law Firm Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **POB 17235** Part 2: Creditors with Nonpriority Unsecured Claims Memphis, TN 38187 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Nationwide Credit** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 14581 ■ Part 2: Creditors with Nonpriority Unsecured Claims Des Moines, IA 50306 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **North MS Medical Center** Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 2240 Part 2: Creditors with Nonpriority Unsecured Claims Tupelo, MS 38801 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Northland Group** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 390905 Part 2: Creditors with Nonpriority Unsecured Claims Minneapolis, MN 55439 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Pathgroup** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740858 ■ Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45274 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Pilot Receivables** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 10625 Techwoods Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45242 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Premier Radiology** Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 980 ■ Part 2: Creditors with Nonpriority Unsecured Claims **Tupelo, MS 38802** Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Receivables Performance Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Management LLC Part 2: Creditors with Nonpriority Unsecured Claims PO Box 1548 Lynnwood, WA 98046 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Tupelo Service Finance** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1791 Part 2: Creditors with Nonpriority Unsecured Claims Tupelo, MS 38802 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Unifund Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **PO Box 505** ■ Part 2: Creditors with Nonpriority Unsecured Claims Linden, MI 48451 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 6a. 0.00 Total claims Taxes and certain other debts you owe the government 6b. 12,683.39 from Part 1 6b.

Official Form 106 E/F

Claims for death or personal injury while you were intoxicated

Case 18-12789-JDW

Doc 6

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Debtor 1 Susan Parker-Graham Case number (if know) 18-12789 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 12,683.39 Total Claim Student loans 6f. 6f. 0.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 64,410.21 Total Nonpriority. Add lines 6f through 6i. 6j. 64,410.21

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Fill in this infor	mation to identify your	case:			
Debtor 1	Susan Parker-Gra	aham			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case number	18-12789				
(if known)				☐ Che	ck if this is
				ame	nded filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

2.1 Name Number City 2.2 Name Number City 2.3 Name Number City 2.4 Name		State State	ZIP Code	
Number City 2.2 Name Number City 2.3 Name Number City 2.4				
City 2.2 Name Number City 2.3 Name Number City 2.4				
2.2 Name Number City 2.3 Name Number City City 2.4	Street			
Name Number City 2.3 Name Number City 2.4	Street	State	ZIP Code	
Number City 2.3 Name Number City 2.4	Street	State	ZIP Code	
City 2.3 Name Number City 2.4	Street	State	ZIP Code	
2.3 Name Number City 2.4		State	ZIP Code	
2.3 Name Number City 2.4		Otato	Zii Couc	
Name Number City 2.4				
City 2.4				<u> </u>
2.4	Street			<u> </u>
		State	ZIP Code	
Name				
Number	Street			
City		State	ZIP Code	_
2.5				
Name				
Number	Street			<u> </u>
City		State	ZIP Code	_

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		Documer	nt Page 27 o	of 50	
Fill in this	information to identify your	case:			
Debtor 1	Susan Parker-Gra	aham			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case num	ber 18-12789				
(if known)					Check if this is an amended filing
Officia	l Form 106H				
	lule H: Your Cod	ehtors			12/15
501100	dale III. Todi God	CDIOIS			12/13
eople are ill it out, a our name	filing together, both are equ	ally responsible for suppl boxes on the left. Attach . Answer every question.	ying correct informati the Additional Page to	ion. If more space is ne o this page. On the top	te as possible. If two married seded, copy the Additional Page, of any Additional Pages, write
_	, ,	.			
■ No □ Ye:	•				
□ re:	5				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
	. Go to line 3.		with a second that the co		
⊔ Ye:	s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make :	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt sthat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				□ Cabadula D. lina	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, lire	
				☐ Schedule G, line	
-	Number Street			_	

State

City

ZIP Code

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						•				
Fill	in this information to identify your	case:								
Del	btor 1 Susan Park	er-Graham								
	btor 2 puse, if filing)									
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF MISSISSIPPI		_					
Cas	se number 18-12789					Check	if this is:			
(If kr	nown)		-			☐ Ar	amende	d filing		
									g postpetition ollowing date:	
<u>O</u>	fficial Form 106l					IM	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. The control of the cont	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de infori	mati	on about	your spo	use. If mo	ore space is	needed,
١.	information.		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not employed			
		Occupation	ultra sound tec	h self e	mpl	oyed				
	Include part-time, seasonal, or self-employed work.	Employer's name	Independent Im	aging						
	Occupation may include student or homemaker, if it applies.	Employer's address	122 Pinetree Dr. Mooreville, MS 38857							
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
	imate monthly income as of the ouse unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for t	hat perso	n on the li	nes below. If	you need
						For Deb	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

Deb	tor 1	Susan Parker-Graham	_	(Case	number (<i>if kn</i>	own)	18-1	2789		
					For	Debtor 1		For	Debtor	2 or	
	_								n-filing s	•	
	Cop	by line 4 here	4.		\$	0	.00	\$_		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	0	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$.00	\$	-	N/A	_
	5c.	Voluntary contributions for retirement plans	50) .	\$	0	.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0	.00	\$		N/A	_
	5e.	Insurance	5e		\$.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.		\$.00	\$_		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g). 1.+	\$ \$.00	* + \$		N/A N/A	_
_		• • ———————————————————————————————————	_		· —						_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$.00	\$_		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0	.00	\$_		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$	5,012	.50	\$		N/A	
	8b.	Interest and dividends	8b).	\$.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			_			_			_
	0.1	settlement, and property settlement.	80		\$_	700		\$_		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8c 8e		\$ \$.00	\$_ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive	06	5 .	Ψ_	U	.00	Ψ_		IN/A	_
	01.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f		\$	0	.00	\$		N/A	
	8g.	Pension or retirement income	8g	J .	\$	0	.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	0	.00	+ \$		N/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$	5,712	.50	\$_		N/A	A
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		5,712.50	+ \$		N/A	= \$	5,712.50
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		3,7 12.00	. * -		14/74	* -	0,1 12.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe			•				e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	5,712.50
13.	Do y	you expect an increase or decrease within the year after you file this form	?								ly income
		No. Yes Explain:									
		THE EXPLAIN. 1									

Bille	in this informa	tion to identify yo	our case:					
Deb	tor 1	Susan Parke	er-Grahar	n		Che	eck if this is: An amended filing	
Deb	tor 2						J	wing postpetition chapter
(Spc	ouse, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF MIS	SSISSIPPI		MM / DD / YYYY	
Case	e number 18	3-12789						
(If kr	nown)							
Of	ficial Fo	rm 106J						
		J: Your	Fyner	1606				12/15
Be a info nun	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer eve	s possible eded, atta ry questio	If two married people ch another sheet to thi				or supplying correct
Part 1.	Is this a join	ibe Your House It case?	enoia					
	■ No. Go to							
			in a separ	ate household?				
	□ N	0	·					
			st file Offici	al Form 106J-2, Expens	es for Separate Hous	ehold of Del	otor 2.	
2.	Do you have	e dependents?	□ No					
۷.	-	-		Fill and their information for	Daman danska nalas		Daman danska	Dana danandant
	Do not list De Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relate Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	D	41						□ No
	Do not state dependents				son		6	■ Yes
	•							□ No
					son		17	Yes
								□ No
					son		18	Yes
								□ No
•	D							☐ Yes
3.	expenses of	enses include f people other t d your depende	han _—	No Yes				
Part	2: Estim	ate Your Ongoi	na Month	v Expenses				
Esti	imate your ex	penses as of y	our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the
		e naid for ···!4L	non occi-	government accieta	if you know			
the		n assistance an		government assistance cluded it on <i>Schedule I</i>			Your exp	enses
,		,						
4.		r home owners ad any rent for th		ses for your residence r lot.	Include first mortgag	je 4.	\$	1,059.57
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
			•	ipkeep expenses		4c.	:	100.00
F		owner's associa		dominium dues	nomo oquitu la ese	4d.	\$	0.00

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btor 1 Susan Parker-Graham	Case numb	er (if known)	18-12789
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	325.00
6b. Water, sewer, garbage collection	6b.	\$	28.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	600.00
6d. Other. Specify:	6d.	\$	0.00
Food and housekeeping supplies		\$	700.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning		\$	100.00
Personal care products and services	10.	\$	75.00
Medical and dental expenses	11.	\$	225.00
Transportation. Include gas, maintenance, bus or train fare.		·	
Do not include car payments.	12.	\$	500.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
Charitable contributions and religious donations	14.	\$	0.00
Insurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	636.00
15c. Vehicle insurance	15c.		300.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	16.	\$	0.00
Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report a			0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		·	0.00
Other payments you make to support others who do not live with you.		\$	180.00
Specify: Husband's child support	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Sch			
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
Other: Specify:	21.	+\$	0.00
· · · -			0.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	4,878.57
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,878.57
Output to a commence of the control of the control	L		,
Calculate your monthly net income.	20	Φ	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,712.50
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,878.57
	Γ		
23c. Subtract your monthly expenses from your monthly income.	23c.	\$	833.93
The result is your monthly net income.	230.	Ψ	000.00
Do you expect an increase or decrease in your expenses within the year after y For example, do you expect to finish paying for your car loan within the year or do you expect you modification to the terms of your mortgage?			ease or decrease because of
No.			
☐ Yes. Explain here:			

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	0	•			
ebtor 1	Susan Parker-Gra	Anam Middle Name	Last Name		
ebtor 2	, not reallo	imadic Hamo	<u> Last Hamo</u>		
pouse if, filing)	First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
ase number	18-12789				
known)					☐ Check if this is an amended filing
taining mone		n connection with a bank		Making a false statement, in fines up to \$250,000, or in	
Sig	gn Below				
	•	one who is NOT an attori	ney to help you fill out ba	ankruptcy forms?	
	•	one who is NOT an attori	ney to help you fill out ba	ankruptcy forms?	
Did you pa	•	one who is NOT an attori	ney to help you fill out ba	Attach <i>Bankruptcy</i>	
Did you pa	ay or agree to pay some Name of person			Attach <i>Bankruptcy</i>	
Did you pa No Yes. Under penathat they ar	ay or agree to pay some Name of person alty of perjury, I declare			Attach Bankruptcy Declaration, and Si	
Did you pa No Yes. Under penathat they ar X /s/ Sus	ay or agree to pay some Name of person alty of perjury, I declare re true and correct.		nary and schedules filed	Attach Bankruptcy Declaration, and Si	Petition Preparer's Notice, ignature (Official Form 119

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Fill	in this info	rmation to identify you	case:			
De	btor 1	Susan Parker-G	raham			
_		First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Un	ited States B	ankruptcy Court for the:	NORTHERN DISTRICT (OF MISSISSIPPI		
Ca	se number	18-12789				
	nown)	10 12100			_	Check if this is an mended filing
						menaca ming
\sim	:c: -: -	407				
		orm 107				
St	atemen	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		more space is needed, vn). Answer every ques		this form. On the top of any	additional pages, write yoر ما	ir name and case
		,		Lived Defere		
га			rital Status and Where You	Lived Belore		
1.	What is yo	ur current marital statu	s?			
	■ Marrie					
2	During the	last 2 years, have you	lived anywhere other than	where you live new?		
2.	During the	last 3 years, flave you	lived anywhere other than	where you live now?		
	No					
	☐ Yes. L	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the	last 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property
stat					co, Texas, Washington and W	
	■ No					
	_	Make sure you fill out Sch	nedule H: Your Codebtors (Ot	fficial Form 106H).		
Рa	rt 2 Expl	ain the Sources of You	r Income			
4.	Fill in the to	tal amount of income yo	nployment or from operating used in the propertion of the properties and a save income that you receive the properties are the properties of the properties	all businesses, including part-		ndar years?
	□ No					
		ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,795.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Susan Parker-Graham

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that app	
For last calendar year: (January 1 to December 31, 2017)		■ Wages, commissions, bonuses, tips	\$55,000.00	☐ Wages, comm bonuses, tips	uissions,
		☐ Operating a business		☐ Operating a but	usiness
For the calendar y (January 1 to Dec		■ Wages, commissions, bonuses, tips	\$55,394.22	☐ Wages, comm bonuses, tips	nissions,
		☐ Operating a business		☐ Operating a but	usiness
and other publ winnings. If you List each source.	ic benefit payments u are filing a joint ca		est; dividends; money collect ou received together, list it o	ted from lawsuits; ronly once under Deb	
		Daliford.		D-1-10	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco	me Gross income (before deductions and exclusions)
Part 3: List Cer	tain Payments Yo	u Made Before You Filed for E	Bankruptcy		
□ No. Ne ind Du: □	ither Debtor 1 nor ividual primarily for ring the 90 days be No. Go to line Yes List below	a personal, family, or household fore you filed for bankruptcy, did 7. each creditor to whom you paid	mer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,425* or more in	of \$6,425* or more	
* 5	not includ	e payments to an attorney for the nt on 4/01/19 and every 3 years	is bankruptcy case.		•
		or both have primarily consult fore you filed for bankruptcy, did		of \$600 or more?	
-	No. Go to line	7.			
	include pa	each creditor to whom you paid lyments for domestic support ob or this bankruptcy case.			ou paid that creditor. Do not so, do not include payments to an
Creditor's Na	me and Address	Dates of paymer	nt Total amount	Amount you	Was this payment for

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Debtor 1 Susan Parker-Graham

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	No									
	Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an				
	No									
	Yes. List all payments to an insider			-						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name				
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures								
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.									
	Case title	Noture of the case	Court or aganov		Status of th					
	Case number	Nature of the case	Court or agency		Status of th	ie case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.									
	Yes. Fill in the information below.									
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happened	4	24.0		property				
		Explain what happened	•							
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.									
	Creditor Name and Address									
				taken						
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No ■ Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a				
Pa	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?				
	Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value				
	Person to Whom You Gave the Gift and Address:									

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14.	Within 2 years before you filed for bankr			s with a total	value of more than	\$600 to any charity?					
	Yes. Fill in the details for each gift or of Gifts or contributions to charities that it more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	total	Describe what you contributed		Dates you contributed	Value					
Pai	rt 6: List Certain Losses										
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?										
	■ No										
	☐ Yes. Fill in the details.										
	Describe the property you lost and how the loss occurred	Inclu	cribe any insurance coverage for the log de the amount that insurance has paid. List rance claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost					
Pai	rt 7: List Certain Payments or Transfers	s									
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition process. No Yes. Fill in the details.	prepa	ring a bankruptcy petition?	. ,	,, ,	rty to anyone you					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	You	Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment					
17.											
	■ No										
	☐ Yes. Fill in the details.										
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all No	u r bus s mad	siness or financial affairs? e as security (such as the granting of a se								
	Yes. Fill in the details.										
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made					
	Person's relationship to you			paid iii ext	Jilalig e						
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.			lf-settled tru	st or similar device	of which you are a					
	Name of trust		Description and value of the proper	rty transferre	ed	Date Transfer was made					

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Debtor 1 Susan Parker-Graham

Par	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No							
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	clos	e account was sed, sold, ved, or sferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	y safe deposit	box or other deposite	ory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the c	ontents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		ontents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	for Someone Else						
23.	Do you hold or control any property that so for someone.	meone else owns? Inc	lude any propert	y you borrowed	d from, are storing fo	r, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the p	roperty	Value		
Par	t 10: Give Details About Environmental Inf	ormation						
For	the purpose of Part 10, the following definiti	ons apply:						
	Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these	he air, land, soil, surfac	ce water, ground					
						or utilize it or used		
	Hazardous material means anything an envi hazardous material, pollutant, contaminant		as a hazardous	waste, hazardo	ous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings th	at you know about, reg	ardless of when	they occurred.				
24.	Has any governmental unit notified you that	t you may be liable or p	ootentially liable	under or in viol	ation of an environm	ental law?		
	■ No □ Yes. Fill in the details.							
	Name of site	Governmental u	nit	Fnvironme	ntal law, if you	Date of notice		
	Address (Number, Street, City, State and ZIP Code)		Street, City, State and		ina iaw, ii you	Date of Hotice		

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Debtor 1 Susan Parker-Graham

25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	_		ntal law, if you	Date of notice	
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	onmental	law?	Include settlements a	nd orders.	
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the c	ase	Status of the case	
Par	11: Give Details About Your Business or 0	Connections to Any Business					
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have any	y of the fo	llowir	ng connections to any	business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	■ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing exe	ecutive of a corporation					
☐ An owner of at least 5% of the voting or equity securities of a corporation							
	□ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
	Business Name	Describe the nature of the business		Employer Identification number Do not include Social Security number or IT			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		·			
		madiaal	Date EIN:		siness existed		
	Independent Imaging Services, LLC	medical			27-0133771		
	122 Pinetree Dr Mooreville, MS 38857	Guy Watts, Bookkeeper Sam Knight, Accountant	Fron	n-To	8/2003 - present		
	Evolve Medical Solutions, LLC 122 Pinetree Dr.	medical	EIN:		unknown		
	Mooreville, MS 38857	Harold Hodges	Fron	n-To	6/2014-10/2014		
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financi institutions, creditors, or other parties.			de all financial			
■ No							
	Yes. Fill in the details below.						
	Name Address (Number Street City State and ZIP Code)	Date Issued					

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Debtor 1 Susan Parker-Graham

Part 12: Sign Below		
are true and correct. I understand that making	Financial Affairs and any attachments, and I decl g a false statement, concealing property, or obtai to \$250,000, or imprisonment for up to 20 years,	ining money or property by fraud in connection
/s/ Susan Parker-Graham Susan Parker-Graham Signature of Debtor 1	Signature of Debtor 2	
Date August 3, 2018	Date	
Did you attach additional pages to <i>Your State</i> ■ No □ Yes	ement of Financial Affairs for Individuals Filing fo	r Bankruptcy (Official Form 107)?
	not an attorney to help you fill out bankruptcy for	rms?
	nkruptcy Petition Preparer's Notice, Declaration, and	Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-12789-JDW Doc 6 Filed 08/03/18 Entered 08/03/18 16:05:44 Desc Main Document Page 44 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Mississippi

In re	Susan Parker-Graham	11	Case No.	18-12789
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	ENSATION OF ATTORNE	Y FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, or ag	reed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,400.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	3,400.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	☐ Debtor ☐ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person unless	s they are memb	pers and associates of my law firm
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects of the	e bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit 	atement of affairs and plan which may	be required;	
	d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	ons as needed; preparation and	on planning; filing of moti	preparation and filing of ons pursuant to 11 USC
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for paym	ent to me for re	epresentation of the debtor(s) in
,	August 3, 2018	/s/ Dalton Middleton		
Date		Dalton Middleton		
		Signature of Attorney Middleton & Tinsley L	aw Firm, PLL	С
		PO Box 3129		
		Tupelo, MS 38803 662-205-4749 Fax: 66	2-269-2424	
		rb@mlawms.com	~~ _	
		Name of law firm		

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United States Bankruptcy Court Northern District of Mississippi

					
In re	Susan Parker-Graham		Case No.	18-12789	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX			
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.			
Date: August 3, 2018	/s/ Susan Parker-Graham Susan Parker-Graham Signature of Debtor		

Acariahealth Pharmacy #11 Inc PO Box 956780 Saint Louis, MO 63195

Afni Attn: Bankruptcy Po Box 3097 Bloomington, IL 61702

AFNI PO Box 3097 Bloomington, IL 61702

Alltran Financial PO Box 610 Sauk Rapids, MN 56379

Alltran Financial LP PO Box 722929 Houston, TX 77272

Americollect Po Box 1566 1851 South Alverno Road Manitowoc, WI 54221

Associated Pathologists LLC c/o Pathgroup PO Box 740858 Cincinnati, OH 45274

AT&T Mobility PO Box 536216 Atlanta, GA 30353

Bank Of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Car Credit 2015 S Gloster ST Tupelo, MS 38801

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank, NA PO Box 6500 Sioux Falls, SD 57117

Commenity Bank/Maurices POB 659705 San Antonio, TX 78265

Comprehensive Pain Specialists PO Box 440210 Nashville, TN 37244

Couch, Conville, & Blitt 1450 Poydras St. Ste 2200 New Orleans, LA 70112

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Dermatology Center of North MS PA 516 Pegram Drive Tupelo, MS 38801

DexYP PO Box 619009 San Antonio, TX 78261

Direct Tv PO Box 6414 Carol Stream, IL 60197

ERC PO Box 23870 Jacksonville, FL 32241 ERC
PO Box 57610
Jacksonville, FL 32241

Firstsource 205 Bryant Woods South Buffalo, NY 14228

Frost-Arnett
P.O. Box 198988
Nashville, TN 37219-8988

IC System
PO Box 64437
Saint Paul, MN 55164

Internal Revenue Service Attn: Special Processing Staff 100 West Capitol Street Room 504 Jackson, MS 39269

Knight
9 East Loockerman St
Ste 3A-543
Dover, DE 19901

LVNV Funding/Resurgent Capital Po Box 10497 Greenville, SC 29603

Mendelson Law Firm POB 17235 Memphis, TN 38187

Michael E Steuer MD PC PO Box 1798 Memphis, TN 38101

Mississippi Department of Revenue Bankruptcy Section PO Box 22808 Jackson, MS 39225-2808 Nationwide Credit PO Box 14581 Des Moines, IA 50306

North MS Medical Center PO Box 2240 Tupelo, MS 38801

North MS Medical Clinics Attn #13416K PO Box 14000 Belfast, ME 04915-4033

Northland Group PO Box 390905 Minneapolis, MN 55439

Pathgroup PO Box 740858 Cincinnati, OH 45274

Pilot Receivables 10625 Techwoods Cincinnati, OH 45242

Portfolio Recovery 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Premier Radiology PO Box 980 Tupelo, MS 38802

Receivables Performance Management LLC PO Box 1548 Lynnwood, WA 98046

Renasant Bank Attn: Bankruptcy Dept. Po Box 4140 Tupelo, MS 38803

Rheumatology & Osteoporosis Ctr Mps 540 Trinity Creek ove Cordova, TN 38018

Seterus, Inc. Attn: Bankruptcy Po Box 1077 Hartford, CT 06143

Shapiro & Massey LLC 1080 River Oaks Drive, Suite B-202 Flowood, MS 39232

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965061 Orlando, FL 32896

The Imaging Center at Wolf River PO Box 630945 Cincinnati, OH 45263

Toyota Financial Services Attn: Bankruptcy Po Box 8026 Cedar Rapids, IA 52409

Tupelo Service Finance PO Box 1791 Tupelo, MS 38802

Unifund PO Box 505 Linden, MI 48451

Wages Roofing 63 Carnathan Drive Tupelo, MS 38801